OPT-MVAC webinar: Qualitative studies
27 November 2025
Webinar recording: (password: %QQ@Rh.7)

Overview:

Purpose of the session

This OPT-MVAC webinar created a space for countries and partners to exchange and align practices on **qualitative research** to support **malaria vaccine implementation**. The focus was on how qualitative methods help explain *why* coverage differs across settings and how to improve acceptance and delivery.

Agenda (main parts)

1. Opening remarks + OPT-MVAC objectives
2. Role of qualitative studies & key considerations for data collection
3. Presentation of a **generic qualitative research "toolkit/protocol"**
4. Country experience (Benin) implementing qualitative case studies
5. Q&A + next steps + closing survey and "group photo"

Key messages from the presentations

1) Why qualitative research matters (Prof. Ndeye Mareme Sougou)

- Qualitative research complements quantitative data by explaining **"how" and "why"** outcomes occur.
- It is especially useful for understanding **community perceptions, norms, barriers, facilitators, and trust** around vaccination.
- Differences vs quantitative:
  - Qualitative = narrative data, **inductive** reasoning, analysis by **themes**, focus on individuals.
  - Quantitative = numeric data, **deductive** reasoning, analysis by **variables**.
- Methods and essentials:
  - **In-depth interviews**, **focus group discussions** (prefer homogenous groups), and **observation**.
  - **Purposive sampling** (including snowball sampling when needed), not random sampling.
  - Importance of **field notes**, reflexivity, triangulation, and quality control.
  - Thematic analysis recommended; countries should aim to **harmonize tools/software** where possible.

2) OPT-MVAC generic qualitative toolkit (Corinne Merle)

- A ready-to-adapt **generic protocol + standard interview guides + consent forms** to speed up protocol development and improve consistency across countries.
- The toolkit is structured like a standard protocol (background, objectives, methods, sampling, analysis, ethics, implementation plan, budget, dissemination).
- It supports exploring:
  - Parents'/caretakers' **attitudes and perceptions** toward the malaria vaccine
  - **Barriers and enabling factors** for uptake
  - Social influences shaping decision-making
  - Prevention practices and practical delivery issues
- Recommended design: **case studies** comparing areas with **high vs low coverage** (and often urban vs rural), with sampling guided by **saturation**.

3) Benin experience: practical lessons (Ludovic N'Tcha)

- Start with a **clear separation** between implementation objectives and **qualitative research questions**.
- Anticipate **ethics approval timelines**; run parallel preparatory work (site mapping, stakeholder engagement).
- Recruit experienced qualitative staff (social science profile, local language skills) and invest in **training + simulations + pilot testing**.
- Maintain strong field operations: equipment readiness, coding systems for recordings, daily follow-up, WhatsApp coordination, and **continuous supervision**.
- Early quality checks prevent wasted time/resources and improve final outputs.

Q&A highlights

- **Number of investigators:** no strict theoretical limit; it's mainly **budget + logistics**. Roles must be clearly defined.
- **Bias in qualitative work:** risks include interviewer influence, recall bias, interpretation bias—reduced through **good training, neutral interviewing, and appropriate recruitment**.
- **Scope vs budget:** better to do **focused, high-quality** studies than large, under-resourced ones.

Next steps under OPT-MVAC

- Countries are at different stages of malaria vaccine introduction, so **timelines differ**.
- The program approach is cyclical: **coverage measurement → qualitative inquiry → national dialogue → improvement strategies**.
- Countries are encouraged to start early on:
    - identifying potential study sites,
    - adapting the generic protocol and tools,
    - preparing ethics submission (ideally **combined** with coverage survey protocols when relevant),
    - planning pharmacovigilance strengthening activities (country-tailored within OPT-MVAC).